



PETITION FOR EXTENSION OF TIME UNDER 37 C.F.R. § 1.136(a)		Atty. Docket No. 01-12										
Inventor(s): HO												
Appln. No.: 10/622,562	Conf. No.: 4794											
Filed: July 18, 2003												
Title: Headgear for Use with a Patient Interface Device												
Examiner: Patel, M.	Group Art Unit: 3743											
Express Mail Label No. (if applicable): EL 997384708 US												
<p>This is a request under the provisions of 37 C.F.R. § 1.136(a) to extend the period for filing a response in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee from the original due date of <u>November 9, 2005</u> are as follows:</p> <p>(check time period desired)</p> <table style="width:100%"><tr><td><input checked="" type="checkbox"/> One month - 37 C.F.R. § 1.17(a)(1)</td><td style="text-align:right">\$ <u>120.00</u></td></tr><tr><td><input type="checkbox"/> Two months - 37 C.F.R. § 1.17(a)(2)</td><td style="text-align:right">\$ _____</td></tr><tr><td><input type="checkbox"/> Three months - 37 C.F.R. § 1.17(a)(3)</td><td style="text-align:right">\$ _____</td></tr><tr><td><input type="checkbox"/> Four months - 37 C.F.R. § 1.17(a)(4)</td><td style="text-align:right">\$ _____</td></tr><tr><td><input type="checkbox"/> Five months - 37 C.F.R. § 1.17(a)(5)</td><td style="text-align:right">\$ _____</td></tr></table> <p>Less the previous extension fee of \$ _____ paid in papers dated _____, which were filed in the present application subsequent to the original due date.</p> <p><input checked="" type="checkbox"/> Fee Transmittal Form Attached. (Submit original and a duplicate for fee processing)</p> <p><input type="checkbox"/> A check covering the amount due of \$ _____ is enclosed (check no. _____).</p> <p><input checked="" type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to Deposit Account No. 50-0558.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0558. A duplicate copy of this sheet is enclosed.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest.</p> <p style="margin-left: 40px;"><input type="checkbox"/> applicant.</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record.</p> <p style="margin-left: 40px;"><input type="checkbox"/> attorney or agent acting under 37 C.F.R. § 1.34(a), Registration No. 44,256</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div><u>November 18, 2005</u> Date</div><div style="text-align: center;"> Signature</div></div> <div style="text-align: center; margin-top: 10px;"><u>Timothy Nathan</u> Typed Name</div>			<input checked="" type="checkbox"/> One month - 37 C.F.R. § 1.17(a)(1)	\$ <u>120.00</u>	<input type="checkbox"/> Two months - 37 C.F.R. § 1.17(a)(2)	\$ _____	<input type="checkbox"/> Three months - 37 C.F.R. § 1.17(a)(3)	\$ _____	<input type="checkbox"/> Four months - 37 C.F.R. § 1.17(a)(4)	\$ _____	<input type="checkbox"/> Five months - 37 C.F.R. § 1.17(a)(5)	\$ _____
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<input type="checkbox"/> Four months - 37 C.F.R. § 1.17(a)(4)	\$ _____											
<input type="checkbox"/> Five months - 37 C.F.R. § 1.17(a)(5)	\$ _____											

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**FEE TRANSMITTAL**

(Effective 12/08/2004)

"Express Mail" Label No. EL 997384708 US

TOTAL AMOUNT OF PAYMENT**\$ 445.00**

Application Number

10/622,562

Filing Date

July 18, 2003

First Named Inventor

HO

Confirmation Number

4794

Group Art Unit

3743

Examiner's Name

Patel, M.

Attorney Docket No.

01-12

METHOD OF PAYMENT1. ☒

The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit
Account
NumberDeposit
Account
Name☒Charge any additional
fee required under 37
C.F.R. §§ 1.16, 1.17
1.19 and 1.20☐Charge the Issue Fee set
forth in 37 C.F.R. § 1.182. ☐ Payment Enclosed:

Check (Check No. _____)

FEE CALCULATION (fees effective 12/08/2004)**1. BASIC FILING, SEARCH, AND EXAM FEES**

(Large Entity Only)

Appln. Type	Filing Fee(\$)	Search Fee(\$)	Exam Fee(\$)	Fees Paid
Utility	300	500	200	
Design	200	100	130	
Plant	200	300	160	
Reissue	300	500	600	
Provisional	200	0	0	

SUBTOTAL (1)**\$ 0.00****2. CLAIMS**

		Extra Claims	Fee from Below	Fee Paid
Total Claims	40	- 35 *	5 x 25 =	125.00
Ind. Claims	5	- 3 *	2 x 100 =	200.00
Multiple Dependent Claims add			360 =	0.00

* Enter Highest Number Previous Paid For

Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 360	2203 180	Multiple dependent claim
1204 200	2204 100	Reissue independent claims over original patent
1205 50	2205 25	Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)**\$ 325.00****FEE CALCULATION (continued)****3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 for each additional 50 sheets or fraction thereof. See 35 U.S.C. § 41(a)(1)(G) and 37 C.F.R. § 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 fraction thereof	Fee(\$)	Fee Paid(\$)
_____	_____	_____	_____	_____

-100 = _____ /50 = _____ (round up to a whole number) X 250 = 0.00

4. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or declaration	
1811	100	1811	100	Certificate of Correction	
1812	2,520	1812	2,520	For filing a request for reexamination	
576	25	576	25	Additional filing receipt, duplicate or corrected due to applicant error	
1251	120	2251	60	Extension for response within first month	120.00
1252	450	2252	225	Extension for response within second month	
1253	1,020	2253	510	Extension for response within third month	
1254	1,590	2254	795	Extension for response within fourth month	
1255	2,160	2255	1,080	Extension for response within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1452	500	2452	250	Petition to revive unavoidably abandoned application	
1453	1,500	2453	750	Petition to revive unintentionally abandoned application	
1501	1,400	2501	700	Utility issue fee (or reissue)	
1502	800	2502	400	Design issue fee	
1814	130	2814	65	Statutory Disclaimer	
1460	130	1460	130	Petitions to the Director	
1807	50	1807	50	Petitions related to provisional applications	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of property)	
1801	790	2801	395	Request for Continued Examination	
1504	300	1504	300	Publication Fee	

Other Fee (specify) _____

SUBTOTAL (3)**\$ 120.00****SUBMITTED BY**

Typed or Printed Name	Timothy Nathan	Reg. Number	44,256
Signature		Date	November 18, 2005
		Deposit Account Number	50-0558